

# CLAIMS ONLY

SERIAL NO.

FILING DATE

APPLICANT(S)

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/			
2				/		
3				/		
4				/		
5				/		
6				/		
7				/		
8				/		
9				/		
10	/			/		
11				/		
12				/		
13					?	
14				/		
15	/			/		
16	X		/	-		
17				/		
18				/		
19				/		
20				/		
21				/		
22				/		
23				/		
24			/	X		
25	X		X	/		
26				/		
27				/		
28					?	
29				/	/	
30				/		
31				/		
32				/		
33				/		
34				/		
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42						
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44						
45						
46						
47						
48						
49						
50						
TOTAL IND.	4					
TOTAL DEP.	29					
TOTAL CLAIMS	33					

*	IND.	DEP.	*	IND.	DEP.	*	IND.	DEP.
51								
52								
53								
54								
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58								
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100								
TOTAL IND.								
TOTAL DEP.								
TOTAL CLAIMS								

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS